

5 USGS 2 Aztec 0 & 6 1 File

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)Form approved.
Budget Bureau No. 42-R355.5.

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL:		OIL WELL ☐	GAS WELL ☒	DRY ☐	Other _____										
b. TYPE OF COMPLETION:		NEW WELL ☒	WORK OVER ☐	DEEP-EN ☐	PLUG BACK ☐	DIFF. RESVR. ☐	Other _____								
2. NAME OF OPERATOR Dugan Production Corp.															
3. ADDRESS OF OPERATOR Box 234, Farmington, N. M.															
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)* At surface At top prod. interval reported below 1500' fs1 950' fs1 At total depth															
14. PERMIT NO.		DATE ISSUED		15. DATE SPUDDED 5/19/70		16. DATE T.D. REACHED 5/25/70		17. DATE COMPL. (Ready to prod.) 6/20/70		18. ELEVATIONS (DF, RKB, RT, GR, ETC.)* 6172' Gr.		19. ELEV. CASINGHEAD ---			
20. TOTAL DEPTH, MD & TVD 1411'		21. PLUG, BACK T.D., MD & TVD 1355'		22. IF MULTIPLE COMPL., HOW MANY* Single		23. INTERVALS DRILLED BY →		ROTARY TOOLS 0-1411'		CABLE TOOLS ---		24. PRODUCING INTERVAL(S), OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)* Pictured Cliffs 1315' - 1400'		25. WAS DIRECTIONAL SURVEY MADE Yes	
26. TYPE ELECTRIC AND OTHER LOGS RUN Schlumberger E.S.						27. WAS WELL CORED No									
28. CASING RECORD (Report all strings set in well)															
CASINO SIZE		WEIGHT, LB./FT.		DEPTH SET (MD)		HOLE SIZE		CEMENTING RECORD							
5 1/2"		144		14'		6 1/4"		5 sx.							
2 7/8"		6.50		1401'		4 3/4"		50 sx.							
29. LINER RECORD															
SIZE		TOP (MD)		BOTTOM (MD)		SACKS CEMENT*		SCREEN (MD)		30. TUBING RECORD					
										SIZE		DEPTH SET (MD)			
										1 1/4"		1303'			
31. PERFORATION RECORD (Interval, size and number)															
1325' - 1329'															
32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.															
DEPTH INTERVAL (MD)						AMOUNT AND KIND OF MATERIAL USED									
1325' - 29'						10,000 20-40 sd.									
						360 bbls. water									
33.* PRODUCTION															
DATE FIRST PRODUCTION ---		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump) Flowing						WELL STATUS (Producing or shut-in) Shut in							
DATE OF TEST 6/30/70		HOURS TESTED 3 hrs.		CHOKE SIZE 5/8"		PROD'N. FOR TEST PERIOD →		OIL—BBL. ---		GAS—MCF. 401		WATER—BBL. ---		GAS-OIL RATIO ---	
FLOW. TUBING PRESS. 35		CASING PRESSURE 197 SI		CALCULATED 24-HOUR RATE →		OIL—BBL. ---		GAS—MCF. 603 CAGF		WATER—BBL. ---		OIL GRAVITY-API (CORR.) ---			
34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)												TEST WITNESSED BY			
35. LIST OF ATTACHMENTS															
36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records															
SIGNED		Original signed by T. A. Dugan						TITLE		Engineer		DATE		7/13/70	

*(See Instructions and Spaces for Additional Data on Reverse Side)

INSTRUCTIONS

General: This form is designed for submitting a complete and correct well completion report and log on all types of lands and leases to either a Federal agency or a State agency, or both, pursuant to applicable Federal and/or State laws and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local, area, or regional procedures and practices, should be shown below or will be issued by, or may be obtained from, the local Federal and/or State office. See instructions on items 22 and 24, and 33, below regarding separate reports for separate completions.

If not filed prior to the time this summary record is submitted, copies of all currently available logs (drillers, geologists, sample and core analysis, all types electric, etc.), formation and pressure tests, and directional surveys, should be attached to the extent required by applicable Federal and/or State laws and regulations. All attachments should be listed on this form, see item 35.

Item 4: If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 18: Indicate which elevation is used as reference (where not otherwise shown) for depth measurements given in other spaces on this form and in any attachments. **Items 22 and 24:** If this well is completed for separate production from more than one interval zone (multiple completion), so state in item 22, and in item 24 show the producing interval, or intervals, top(s), bottom(s) and name(s) (if any) for only the interval reported in item 33. Submit a separate report (page) on this form, adequately identified, for each additional interval to be separately produced, showing the additional data pertinent to such interval.

Item 29: "Sacks Cement": Attached supplemental records for this well should show the details of any multiple stage cementing and the location of the cementing tool.

Item 33: Submit a separate completion report on this form for each interval to be separately produced. (See instruction for items 22 and 24 above.)

37. SUMMARY OF POROUS ZONES:

SHOW ALL IMPORTANT ZONES OF POROSITY AND CONTENTS THEREOF; CORED INTERVALS; AND ALL DRILL-STEM TESTS, INCLUDING DEPTH INTERVAL TESTED, CUSHION USED, TIME TOOL OPEN, FLOWING AND SHUT-IN PRESSURES, AND RECOVERIES

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.

38. GEOLOGIC MARKERS

NAME	MEAS. DEPTH	TOP	TRUE VERT. DEPTH
<u>LOG TOPS</u>			
Pictured Cliffs	1317'		
Total Depth	1411'		